

<i>SERFF Tracking Number:</i>	<i>UHLC-126723537</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>UnitedHealthcare Insurance Company</i>	<i>State Tracking Number:</i>	<i>46244</i>
<i>Company Tracking Number:</i>	<i>AS2592ST</i>		
<i>TOI:</i>	<i>MS08G Group Medicare Supplement - Standard Sub-TOI:</i>		<i>MS08G.001 Plan A 2010</i>
	<i>Plans 2010</i>		
<i>Product Name:</i>	<i>Medicare Supplement</i>		
<i>Project Name/Number:</i>	<i>Print Advertising/AS2592ST</i>		

Filing at a Glance

Company: UnitedHealthcare Insurance Company

Product Name: Medicare Supplement	SERFF Tr Num: UHLC-126723537	State: Arkansas
TOI: MS08G Group Medicare Supplement - Standard Plans 2010	SERFF Status: Closed-Filed-Closed	State Tr Num: 46244
Sub-TOI: MS08G.001 Plan A 2010	Co Tr Num: AS2592ST	State Status: Filed-Closed
Filing Type: Advertisement		Reviewer(s): Stephanie Fowler
	Authors: Michelle Ambach, Tammy Frederick, Bobbie Walton	Disposition Date: 07/22/2010
	Date Submitted: 07/20/2010	Disposition Status: Filed-Closed
Implementation Date Requested: On Approval		Implementation Date:

General Information

Project Name: Print Advertising	Status of Filing in Domicile: Pending
Project Number: AS2592ST	Date Approved in Domicile:
Requested Filing Mode: File & Use	Domicile Status Comments:
Explanation for Combination/Other:	Market Type: Group
Submission Type: New Submission	Group Market Size: Large
Overall Rate Impact:	Group Market Type: Association
Filing Status Changed: 07/22/2010	Explanation for Other Group Market Type:
	State Status Changed: 07/22/2010
Deemer Date:	Created By: Tammy Frederick
Submitted By: Michelle Ambach	Corresponding Filing Tracking Number:

Filing Description:

We enclose for your information and review, proof copies of advertising for use in connection with the AARP group health insurance program. This advertising is new and does not replace any material previously submitted to the Department.

This Invitation to Inquire is a Medicare Supplement Advertisement. The Policy Form Number GRP79171 GPS-1 appears in the disclaimer paragraph on AS2592ST. Final production of the enclosed advertising will show the component number on the bottom left hand corner of the Print Ad.

SERFF Tracking Number: UHLC-126723537 State: Arkansas
Filing Company: UnitedHealthcare Insurance Company State Tracking Number: 46244
Company Tracking Number: AS2592ST
TOI: MS08G Group Medicare Supplement - Standard Sub-TOI: MS08G.001 Plan A 2010
Plans 2010
Product Name: Medicare Supplement
Project Name/Number: Print Advertising/AS2592ST

The business reply card, MS2519ST, which is attached to this print advertisement for print placement only (FPO), was submitted to the Department on June 25, 2010 under our file number AS2591ST.

The variable copy will be filled with the consumers address, phone number and vendor code.

Company and Contact

Filing Contact Information

Susan Cipollo, Director Susan_J_Cipollo@uhc.com
680 Blair Mill Rd. 215-902-8444 [Phone]
Horsham, PA 19044 215-902-8813 [FAX]

Filing Company Information

UnitedHealthcare Insurance Company CoCode: 79413 State of Domicile: Connecticut
185 Asylum Street Group Code: 707 Company Type: Life and Health
Hartford, CT 06103 Group Name: State ID Number:
(860) 702-5000 ext. [Phone] FEIN Number: 36-2739571

Filing Fees

Fee Required? Yes
Fee Amount: \$50.00
Retaliatory? No
Fee Explanation: \$50.00 x 1=\$50.00
Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
UnitedHealthcare Insurance Company	\$50.00	07/20/2010	38147407

SERFF Tracking Number: UHLC-126723537 State: Arkansas
Filing Company: UnitedHealthcare Insurance Company State Tracking Number: 46244
Company Tracking Number: AS2592ST
TOI: MS08G Group Medicare Supplement - Standard Sub-TOI: MS08G.001 Plan A 2010
Plans 2010
Product Name: Medicare Supplement
Project Name/Number: Print Advertising/AS2592ST

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Filed-Closed	Stephanie Fowler	07/22/2010	07/22/2010

SERFF Tracking Number:	UHLC-126723537	State:	Arkansas
Filing Company:	UnitedHealthcare Insurance Company	State Tracking Number:	46244
Company Tracking Number:	AS2592ST		
TOI:	MS08G Group Medicare Supplement - Standard Sub-TOI:		MS08G.001 Plan A 2010
	Plans 2010		
Product Name:	Medicare Supplement		
Project Name/Number:	Print Advertising/AS2592ST		

Disposition

Disposition Date: 07/22/2010

Implementation Date:

Status: Filed-Closed

Comment:

Rate data does NOT apply to filing.

<i>SERFF Tracking Number:</i>	<i>UHLC-126723537</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>UnitedHealthcare Insurance Company</i>	<i>State Tracking Number:</i>	<i>46244</i>
<i>Company Tracking Number:</i>	<i>AS2592ST</i>		
<i>TOI:</i>	<i>MS08G Group Medicare Supplement - Standard Sub-TOI:</i>		<i>MS08G.001 Plan A 2010</i>
	<i>Plans 2010</i>		
<i>Product Name:</i>	<i>Medicare Supplement</i>		
<i>Project Name/Number:</i>	<i>Print Advertising/AS2592ST</i>		

Schedule	Schedule Item	Schedule Item Status	Public Access
Form	Print Ad	Filed	Yes

SERFF Tracking Number: UHLC-126723537 State: Arkansas

Filing Company: UnitedHealthcare Insurance Company State Tracking Number: 46244

Company Tracking Number: AS2592ST

TOI: MS08G Group Medicare Supplement - Standard Sub-TOI: MS08G.001 Plan A 2010
Plans 2010

Product Name: Medicare Supplement

Project Name/Number: Print Advertising/AS2592ST

Form Schedule

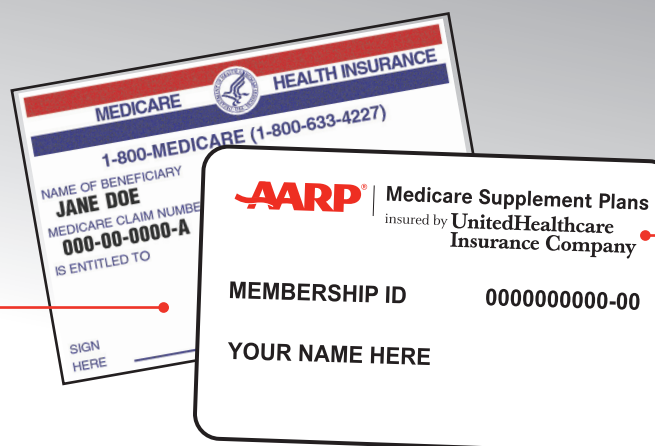
Lead Form Number: AS2592ST

Schedule Item	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
Filed 07/22/2010	AS2592ST	Advertising	Print Ad	Initial		45.000	AS2592STfile.pdf

**Attention Area
Residents**

**Consider a Medicare supplement insurance plan
with a competitive rate.**

**This covers about
80% of your
Part B expenses.**



This helps cover some of the other 20%.

AARP® | Medicare Supplement Plans
insured by **UnitedHealthcare
Insurance Company**

An AARP® Medicare Supplement Insurance Plan, insured by UnitedHealthcare Insurance Company (UnitedHealthcare Insurance Company of New York for New York residents), could save you thousands in out-of-pocket expenses.*

**Request your FREE information kit today, even
if you're not an AARP member.**

Remember, you must be a member to enroll.

**Call toll-free [1-800-523-5800], ext. [XXX]
(TTY: 711) or mail in the attached card.**

AS2592ST

Give this card to a friend.

*Medicare Payment Advisory Commission (MedPAC). A Data Book: Healthcare spending and the Medicare Program, June 2009. <http://www.medpac.gov/documents/Jun09DataBookEntireReport.pdf> (8 Mar, 2010) p. 63,65.

The AARP Medicare Supplement Insurance Plans carry the AARP name and UnitedHealthcare pays a royalty fee to AARP for use of the AARP intellectual property. Amounts paid are used for the general purpose of AARP and its members. Neither AARP nor its affiliate is the insurer.

☒ **YES! I'd like to know more about AARP® Medicare Supplement Insurance Plans, including benefits, costs, eligibility requirements, exclusions and limitations.**

Return this card or call toll-free: [1-800-523-5800] ext. [XXX] (TTY: 711)

Member Name: _____ (MR., MRS., MS.) PLEASE PRINT
Date of Birth: _____ Medicare (Part B) Effective Date: _____
Spouse Name: _____ (MR., MRS., MS.) PLEASE PRINT
Date of Birth: _____ Medicare (Part B) Effective Date: _____
Address: _____
City: _____ State: _____ ZIP: _____
My AARP Membership number is (not required): _____
Phone: (____) _____ - _____
E-mail Address: _____

**If you provide your phone number or email address, a representative may contact you.
This is a solicitation of insurance. An agent/producer may contact you.**

Insured by UnitedHealthcare Insurance Company, Horsham, PA (UnitedHealthcare Insurance Company of New York, Islandia, NY for New York residents).

AARP does not employ or endorse agents, brokers, producers, representatives or advisors.

Not connected with or endorsed by the U.S. Government or the Federal Medicare Program.

☒ **YES! I'd like to know more about AARP® Medicare Supplement Insurance Plans, including benefits, costs, eligibility requirements, exclusions and limitations.**

Return this card or call toll-free: [1-800-523-5800] ext. [XXX] (TTY: 711)

Member Name: _____ (MR., MRS., MS.) PLEASE PRINT
Date of Birth: _____ Medicare (Part B) Effective Date: _____
Spouse Name: _____ (MR., MRS., MS.) PLEASE PRINT
Date of Birth: _____ Medicare (Part B) Effective Date: _____
Address: _____
City: _____ State: _____ ZIP: _____
My AARP Membership number is (not required): _____
Phone: (____) _____ - _____
E-mail Address: _____

**If you provide your phone number or email address, a representative may contact you.
This is a solicitation of insurance. An agent/producer may contact you.**

Insured by UnitedHealthcare Insurance Company, Horsham, PA (UnitedHealthcare Insurance Company of New York, Islandia, NY for New York residents).

AARP does not employ or endorse agents, brokers, producers, representatives or advisors.

Not connected with or endorsed by the U.S. Government or the Federal Medicare Program.

Choose a plan offering competitive rates. It could be a great choice for you.

Help protect yourself from some out-of-pocket medical expenses.

Choose the only Medicare supplement insurance endorsed by AARP.

Medicare doesn't pay for everything. In fact, having Medicare alone could leave you with up to thousands in out-of-pocket costs and deductibles that you have to pay! That's why there's Medicare supplement insurance. AARP Medicare Supplement Insurance Plans, insured by UnitedHealthcare Insurance Company (UnitedHealthcare Insurance Company of New York for New York residents), are one option to consider. Like all Medicare supplement plans, they offer:

- The freedom to choose any doctor and hospital that accept Medicare patients
- Absolutely no referrals needed to see specialists
- Help with paying the 20% or more that Medicare doesn't pay, depending on the plan you choose

Plus, they offer:

- The only Medicare supplement insurance that carries the AARP name and the stability of UnitedHealthcare Insurance Company*
- Competitive rates available only to AARP members

*In 2009, UnitedHealthcare Insurance Company was rated "A-stable" by A.M. Best, an independent organization that evaluates insurance company financial performance.

¹Medicare Payment Advisory Commission (MedPAC). A Data Book: Healthcare spending and the Medicare Program, June 2009.
<http://www.medpac.gov/documents/Jun09DataBookEntireReport.pdf> (8 Mar, 2010) p. 63,65.

AARP does not recommend health related products, services, insurance and programs. You are strongly encouraged to evaluate your needs.

Insured by UnitedHealthcare Insurance Company, Horsham, PA (UnitedHealthcare Insurance Company of New York, Islandia, NY for New York residents). Policy Form No. GRP 79171 GPS-1 (G-36000-4). In some states, plans may be available to persons eligible for Medicare by reason of disability. All plans may not be available in your state/area.

Not connected with or endorsed by the U.S. Government or the Federal Medicare Program.

This is a solicitation of insurance. An agent/producer may contact you.

AARP and its affiliate are not insurance agencies or carriers and do not employ or endorse insurance agents, brokers, producers, representatives or advisors.

Call to receive complete information including benefits, costs, eligibility requirements, exclusions and limitations.

**Discover a plan held by many members nationwide.
Request your FREE information kit – even if you're not
an AARP member (you must be a member to enroll).
And feel free to tell a friend. There's no obligation.**

Call toll-free today.

[1-800-523-5800] ext. [XXX] (TTY: 711)

Or, mail the attached reply card.

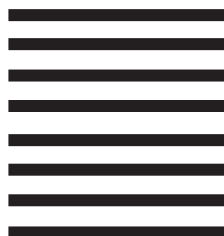


Medicare Supplement Plans
insured by **UnitedHealthcare
Insurance Company**

AARP | Medicare Supplement Plans
insured by **UnitedHealthcare
Insurance Company**



**NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES**



BUSINESS REPLY MAIL

FIRST-CLASS MAIL PERMIT NO. 45 LEHIGH VALLEY, PA

POSTAGE WILL BE PAID BY ADDRESSEE

**UNITEDHEALTHCARE
INSURANCE COMPANY**
P.O. BOX 25601
LEHIGH VALLEY, PA 18003-9905



MS2519ST

AARP | Medicare Supplement Plans
insured by **UnitedHealthcare
Insurance Company**



**NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES**



BUSINESS REPLY MAIL

FIRST-CLASS MAIL PERMIT NO. 45 LEHIGH VALLEY, PA

POSTAGE WILL BE PAID BY ADDRESSEE

**UNITEDHEALTHCARE
INSURANCE COMPANY**
P.O. BOX 25601
LEHIGH VALLEY, PA 18003-9905



MS2519ST